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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor:	Kevin L. Hunter	Examiner:	Cliff N. Vo
Application No.:	10/045,662	Art Unit:	2671
Filed:	October 18, 2001	Docket No.:	ELECP006C1
Title:	SYSTEM AND METHOD FO GENERATING AN ANIMATABLE CHARACTER		

CERTIFICATE OF FACSIMILE

I hereby certify that this correspondence is being transmitted by facsimile to the Patent and Trademark Office on August 31, 2004

Signed: Vicki Li

Vicki Lorist

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

This is a Request for Continued Examination (RCE) under 37 CFR §1.114 of the above-identified application.

1. Submission required under 37 CFR §1.114

a. ☐ Previously submitted:

☐ Consider the amendment(s)/reply under 37 CFR §1.116 previously filed on _____

☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____

☐ Other _____

b. Enclosed:

- ☒ Amendment/Reply
- ☐ Affidavit(s)/Declaration(s)
- ☐ Information Disclosure Statement (IDS)
- ☒ Other: Petition for Revival of An Application for Patent Abandoned Unintentionally Under 37 CFR 1.137(b)

ATTORNEY DOCKET NO. ELECP006C1

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c. Fee Calculation: The fee for excess claims, if applicable, has been calculated as shown below.

	Claims filed with RCE		Present Extra	Small Entity			Large Entity	
				Rate	Additional Fee		Rate	Additional Fee
Total Claims	13	Less	20	x \$9 = \$		OR	x \$18 = \$	
Indep Claims	8	Less	03	x \$43 = \$		OR	x \$86 = \$	
RCE Filing Fee				x \$385		OR	x \$770	770
Three Month Extension of Time Fee								950
[] Multiple Dependent claim Present & Fee Not previously paid				x \$145 = \$		OR	x \$290 = \$	
				TOTAL \$			TOTAL \$	1720

2. Miscellaneous:

a. ☐ Suspension of action on the above-identified application is requested under 37 CFR §1.103(c) for a period of _____ months.

b. ☐ Other _____

3. ☒ Applicant hereby petitions for a **THREE** month extension of time.

4. ☐ Applicant(s) hereby petition that any additional required extension of time be granted.

5. ☐ Enclosed is our Check No. _____ in the amount of \$_____ to cover the RCE Fee required under 37 CFR §1.17 (e), the additional claim fee, if any, and/or extension of time fees.

6. ☒ Please charge Deposit Account No. 50-0685 (ELECP006C1) in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.

7. ☒ If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 ().

8. ☐ Applicant Initiated Interview Request Form.

9. ☒ Please continue to send correspondence to the following address:

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Date: 8-30-04

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